California Department of Health Services Licensing and Certification Program (L&C) Aide and Technician Certification Section (ATCS) 1615 Capitol Avenue, MS 3301 P.O. Box 997416 Sacramento, CA 95899-7416 (916) 327-2445

CERTIFIED HEMODIALYSIS TECHNICIAN INITIAL/RENEWAL APPLICATION

(See requirements on reverse)

Last name (including other names)		First name	First name		MI	Sex Male	☐ Female	
Mailing address (numbe	r and street name or P.O. Boy	number)	City		State	ZIP code		
Mailing address (number and street name or P.O. Box number)			City		State	Zir code		
Date of birth	*Social Security Number (SSN)		Driver's license number		Telepho	Telephone number		
Month Day Year			Number:		_			
/ /			State:					
Place of Birth Height		Height	Weight	ht Eye color		Hair color		
		Initia	 I Certification					
Processing Fe	es Returned: \$							
Dialysis Facility			Signature of RN Trainer					
Dialysis Training Number	·r		<u>i</u> >					
			Signature of Med	ical Director				
Facility Address								
			>					
Trainee traine	d and can operate	the following eq	uipment:					
1.			5.					
2.			6.					
3.			7.					
4.			8.					
Yes No	Has any health-rela (revoked, annulled, license or certificate	cancelled, suspend						
License or certificate								
I certify, under pe	enalty of perjury under	the laws of the Sta	te of California, tha	at the foregoing is t	true and o	correct.		
Signature of applica	nt			. <u>————</u> Date				

Incomplete applications will be returned

Initial/Renewal Certified Hemodialysis Technician (CHT) Requirements

A CHT may not perform any duties that require a professional medical or nursing license.

A. Requirements for Initial Certification

To gain certification as a hemodialysis technician, an individual must have:

- Completed an ATCS-approved hemodialysis training and testing program in a hemodialysis clinic, hospital unit, or private school; OR
- Graduated from an ATCS-hemodialysis training and testing program operated by an accredited college or university; OR
- Obtained national certification from the Board of Nephrology Examination for Nurses and Technicians (BONENT).

B. Renewals

A renewal notice is sent to each CHT approximately four months before his/her certificate expires. However, if the CHT does not receive the notice, it is the responsibility of the CHT to renew his/her certificate in a timely manner.

To apply for renewal, the following must be submitted to ATCS:

- 1. This completed application or the completed renewal notice.
- 2. Proof of 30 hours of continuing education taken in the last four years only.

C. In-Service Training / Continuing Education Requirements

Proof of 30 hours of in-service training/continuing education units (CEUs) is required at time of renewal. Original course certifications and/or report cards should be kept by the CHT for four years in the event the CHT is selected for a random audit.

The CEU requirement may be met through health-related courses offered by the following:

- Accredited post-secondary institutions (colleges and adult education)
- Continuing education providers approved by California Board of Registered Nurses and other recognized health associations
- Employer-sponsored in-service training or continuing education programs

Information Collection and Access: Privacy Statement

*Social Security Number Disclosure: Pursuant to Section 666(a)(13) of Title 42 of the United States Code and California Family Code Section 17520, subdivision (d), the California Department of Health Services (CDHS) is required to collect social security numbers from all applicants for nursing assistant certificates, home health aide certificates, hemodialysis technician certificates or nursing home administrator licenses. Disclosure of your social security number is mandatory for purposes of establishing, modifying, or enforcing child support orders upon request by the Department of Child Support Services and for reporting disciplinary actions to the Health Integrity and Protection Data Bank as required by 45 CFR §§ 66.1 *et seq.* Failure to provide your social security number will result in the return of your application. Your social security number will be used by CDHS for internal identification, and may be used to verify information on your application, to verify certification with another state's certification authority, for exam identification, for identification purposes in national disciplinary databases or as the basis of a disciplinary action against you.